

PERSONAL DATA SHEET

WARNING: Any misinterpretation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes (☐ and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

1. CS ID No.

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	PIAMONTE		
FIRST NAME	PATRICK JOHN		NAME EXTENSION (JR., SR)
MIDDLE NAME	BELARMINO		
3. DATE OF BIRTH (mm/dd/yyyy)	01/18/1985	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization Pls. indicate country:
4. PLACE OF BIRTH	BAYBAY CITY, LEYTE	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6 CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
7. HEIGHT (m)	170.18	ZIP CODE	6521-A
8. WEIGHT (kg)	85		
9. BLOOD TYPE	B	18. PERMANENT ADDRESS	House/Block/Lot No. Street PANGASUGAN Subdivision/Village Barangay BAYBAY CITY LEYTE City/Municipality Province
10. GSIS ID NO.		ZIP CODE	6521-A
11. PAG-IBIG ID NO.	1211-5292-0188		
12. PHILHEALTH NO.	13-025150685-0		
13. SSS NO.	063377824-6	19. TELEPHONE NO.	
14. TIN NO.	946-086-711	20. MOBILE NO.	09261272386
15. AGENCY EMPLOYEE NO.		21. E-MAIL ADDRESS (if any)	pibpiamonte@gmail.com

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	PIAMONTE		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	RAIZEL	NAME EXTENSION (JR., SR)	XANDER UZIEL M. PIAMONTE	08.14.2013
MIDDLE NAME	MEANO		MIGUEL DOMINIC B. PIAMONTE	10/1/2011
OCCUPATION	FRONT DESK OFFICER			
EMPLOYER/BUSINESS NAME	VSU HOSTEL			
BUSINESS ADDRESS	VISCA, BAYBAY CITY, LEYTE			
TELEPHONE NO.				
24. FATHER'S SURNAME	PIAMONTE			
FIRST NAME	EDITO	NAME EXTENSION (JR., SR)		
MIDDLE NAME	GLORIA			
25. MOTHER'S MAIDEN NAME				
SURNAME	BELARMINO			
FIRST NAME	MARISSA			
MIDDLE NAME	BILLIONES		(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	PANGASUGAN ELEMENTARY SCHOOL					1998	VALEDICTO RIAN
SECONDARY	VISAYAS STATES UNIVERSITY LABORATORY HIGH SCHOOL					2002	
VOCATIONAL / TRADE COURSE	TESDA	FOOD AND BEVERAGE SERVICES				2012	
COLLEGE	VISAYAS STATES UNIVERSITY	B.S. IN AGRICULTURE				2006	
GRADUATE STUDIES							

(Continue on separate sheet if necessary)


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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	CAREER SERVICE EXAMINATION (PROFESSIONAL)	80.5	6/8/2017	SAINT JOSEPH COLLEGE, MAASIN CITY		
	CLERICAL EXAM (VSU)			VSU		

V. WORK EXPERIENCE

(Include private employment. Start from your recent work) Description of duties should be indicated in the attached Work Experience sheet.

[illegible]

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIC / NON-GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATION/S

29.	NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
		From	To		

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED
(Start from the most recent L&D/training program and include only the relevant L&D/training taken for the last five (5) years for Division Chief/Executive/Managerial positions)


30.	TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/ Supervisory/ Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
		From	To			
	Hands-Only Cardiopulmonary Resuscitation	July 21, 2022	July 22, 2022	16	Tech	VSU
	Training/Seminar Workshop on Introduction to Metrology and Verification of Common Laboratory Equipment	July 12,2022	July 13,2022	16.0	Tech	VSU
	Training/Seminar Workshop on Introduction to Metrology and Verification of Common Laboratory Equipment	6/21/2022	6/22/2022	16.0	tech	VSU
	Seminar/Lecture on Intellectual Property Rights (IPR)	August 20, 2021		3.0		VSU
	RSP Management System	July 28,2021		8.0		VSU
	Webinar on Chemical Waste Management and Safety In the Chemical Lab	April 29, 2021		8.0		VSU
	Orientation Workshop Among JO Clerks & Lab Tech	1.15.19		8.0		VSU
	Finding the Core Value and Living the Core Value	9.18.15	9.19.15	16.0		NWTF




(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31.	SPECIAL SKILLS and HOBBIES	32.	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33.	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	DRIVING				
	PALYING BASKETBALL				
	COMPUTER SKILLS				

(Continue on separate sheet if necessary)

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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details: _____</div>												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details: _____</div>												
	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details: Date Filed: _____ Status of Case/s: _____</div>												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details: _____</div>												
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> YES</div><div><input type="checkbox"/> NO</div></div> <div>If YES, give details: RESIGNATION/FINISHED CONTRACT _____</div>												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details: _____</div>												
	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details: _____</div>												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, give details (country): _____</div>												
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, please specify: _____</div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, please specify ID No: _____</div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> YES</div><div><input checked="" type="checkbox"/> NO</div></div> <div>If YES, please specify ID No: _____</div>												
41. REFERENCES (Person not related by consanguinity or affinity to applicant /appointee)													
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 35%;">NAME</th><th style="width: 35%;">ADDRESS</th><th style="width: 30%;">TEL. NO.</th></tr></thead><tbody><tr><td>Analyn Mazo</td><td>VSU,Visca, Baybay City, Leyte</td><td></td></tr><tr><td>Jessamine C. Ecleo</td><td>VSU,Visca, Baybay City, Leyte</td><td>9176341430</td></tr><tr><td>Mario Lilio Valenzona</td><td>VSU,Visca, Baybay City, Leyte</td><td>9176341514</td></tr></tbody></table>		NAME	ADDRESS	TEL. NO.	Analyn Mazo	VSU,Visca, Baybay City, Leyte		Jessamine C. Ecleo	VSU,Visca, Baybay City, Leyte	9176341430	Mario Lilio Valenzona	VSU,Visca, Baybay City, Leyte	9176341514
NAME	ADDRESS	TEL. NO.											
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Mario Lilio Valenzona	VSU,Visca, Baybay City, Leyte	9176341514											
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.													
<div style="border: 1px solid black; padding: 2px;">Government Issued ID (i.e.Passport, GSIS, SSS, PRC, Driver's License, etc.) <i>PLEASE INDICATE ID Number and Date of Issuance</i></div> <div style="border: 1px solid black; padding: 2px;">Government Issued ID: H03-06-002134</div> <div style="border: 1px solid black; padding: 2px;">ID/License/Passport No.: H03-06-002134</div> <div style="border: 1px solid black; padding: 2px;">Date/Place of Issuance: 7.16.18</div>	<div style="border: 1px solid black; padding: 10px; text-align: center;"> Signature (Sign inside the box) 18/12/22 Date Accomplished</div>	<div style="border: 1px solid black; padding: 10px;"> PHOTO</div> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> Right Thumbmark</div>											
SUBSCRIBED AND SWORN to before me this _____, affiant exhibiting his/her validly issued government ID as indicated above.													
<div style="border: 1px solid black; width: 200px; height: 50px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto; text-align: center;">Person Administering Oath</div>													